

# Quick Updates

July 9, 2004

Nursing & Patient Care Services

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## July 2004

1—27	CRIS End-User Training
13—14	PALS Provider Course
13	CRC Town Hall Meeting
23	2 <sup>nd</sup> Annual NIH Commissioned Officer Promotion Ceremony
26	NPCS Orientation
31	CRIS Go-Live
August 2004	
4—5	Administration & Management of Cytotoxic and Biologic Agents
23	NPCS Orientation

Past issues of the Quick Updates are posted on the Nursing & Patient Care Services intranet:

<http://intranet.cc.nih.gov/nursing/jcaho/quickupdates.html>.

Email your comments, suggestions, and questions to the **QU** editors at CC-NURS QU Editor.

## Committee Shorts

### Nursing Practice Council (June 2004)

#### Clinical Practice Committee

A recommendation to delete the following **SOP's** in favor of the AACN Manual was approved without debate:

- Pre- and Post-Cardiac Catheterization
- Neuromuscular Blockade
- Temporary Transvenous Pacemaker
- Transcutaneous External Pacing
- Pericardial Pigtail Catheter

**PRO: Transfer to the Morgue** was approved with the following 2 additions:

- There is a new requirement to complete a **Morgue Log** when a patient is taken to the morgue. Filling out the log requires that you provide the name of the deceased, originating PCU, date/time the deceased is brought to the morgue, and the signature of the staff who transported the body.
- Use of a Golvo® Patient Lift Device **disposable** morgue sheets for transferring the deceased to the morgue is now required. Disposable morgue sheets are available from CHS or from 11 West (when CHS is closed). After the deceased has been transferred to a morgue drawer, the disposable morgue sheet remains under the deceased. The sheet can be used again when the deceased is moved by a pathologist or a funeral director.

**SCD and Compression Stockings** — At the May 2004 NPC meeting, you asked if MIS/CRIS allowed an LIP to specify in their medical order the application of an SCD to just one (1) extremity. The answer is, "YES." Additionally, a nurse can specify in their documentation to which extremity the SCD and/or compression stocking has been applied.

**Living With Cancer Series** — On the recommendation of our oncology colleagues, the 15 year old "Living with Cancer Series" is being removed as a patient education resource in favor of publications currently available through Micromedex and the National Cancer Institute (NCI).

### Standardization Committee (June 2004)

**Fitted Sheets** — As of June 14th, the Housekeeping and Fabric Care Department (HFCD) began distributing a new fitted sheet that is softer, more absorbent, and with deeper corners. The new sheets fit all mattresses in the CC and should not pop off when patients occupy the beds.

**Oxygen Tank Regulators** — In the near future all oxygen cylinders will be fitted with new regulators. The new regulators are made of plastic with an easy to carry handle and a quick on/off valve that is much easier to read and adjust to appropriate rate of flow per minute. These regulators will also assure that the tanks can be taken into an MRI scanner. The exchange will be done gradually over a period of weeks.

## You and Your Nursing License

**Have you been advised that it's time to renew your nursing license? Here's what you need to know:**

- Every nurse must have a current and valid license.
- The NIH Clinical Center accepts nursing licenses from all 50 states, the District of Columbia, and all U.S. territories.
- It is your responsibility to provide your supervisor with a copy of your license or printed proof of verification by the 15th of the month in which your license expires.
- If you do not provide proof of a valid license by the last business day prior to the date of license expiration, you will be sent home on AWOL.

**If your license is issued by the State of Maryland, here are some tips that you might find helpful.**

### Renewal Notice

The Maryland Board of Nursing will mail a "time to renew" notice about 8 weeks prior to your license expiration. This is your only notification! You then have the option to renew using a traditional "paper" application or an electronic application.

### "Paper" Renewal Application

- If you choose to file a "paper" renewal application, you have to request that the MD Board of Nursing send you a renewal form application. It will NOT be sent to you automatically.
- If you submit a complete application, you will receive your license in the U.S. mail approximately 4 weeks later.
- If you submit an incomplete renewal application or submit information that requires further investigation, there will be a delay in processing the renewal.
- The MD Board of Nursing may send you a postcard that indicates your renewal application has been received. This is *NOT* recognized by the Board of Nursing or NPCS as proof of license renewal.

### Electronic Renewal Application

- If you file your renewal application on-line (<http://www.mbon.org>), you will receive your license in the U.S. mail approximately one (1) week later.

## Safety Briefs

### Portable Oxygen

We wanted you to know that our current portable oxygen system is not appropriate for *extended* passes or home care. If your patient needs portable O<sub>2</sub> for a scheduled pass or discharge home, please keep in mind the following important safety tips.

#### Going on Pass

- The Respiratory Therapy Department can provide only one (1) portable O<sub>2</sub> cylinder to a patient leaving the CC on a day pass. For patient and family safety, the CC will not dispense a portable O<sub>2</sub> cylinder for an overnight pass.
- The CC will not dispense a portable O<sub>2</sub> cylinder for a discharge home. An exception to this may occur if a patient requires oxygen from the CC to an airport. In this event, a medical order is entered and transportation is arranged by contacting ground transportation (301-496-1161) to request a contracted taxi service whose drivers are trained in O<sub>2</sub> cylinder safety (you will need to identify the patient's Institute and Branch). The taxi driver will deliver the patient to the airport and then return the cylinder to the CC once the patient has safely boarded the plane.
- In all events, a medical order for portable O<sub>2</sub> is required before an O<sub>2</sub> cylinder is dispensed to a patient.
- The number of hours away from the CC cannot exceed a patient's O<sub>2</sub> requirements provided by one (1) filled aluminum O<sub>2</sub> cylinder.

#### Here's how a Respiratory Therapist (RT) can help you:

- Based on a patient's O<sub>2</sub> requirements, an RT calculates the length of time one (1) O<sub>2</sub> cylinder will provide oxygen to a patient. This information will determine how long a patient can safely remain on pass.
- Prior to going on pass, an RT will provide a patient/family the required instruction in the safe use of an O<sub>2</sub> cylinder. An RT will validate the patient/family's return demonstration and then, document this in the medical record.

#### Here's how you can help:

- As soon as you know that your patient may be going on pass or discharged home, begin proactive planning with the interdisciplinary team.
- Medical orders for a pass should be written as early as possible. The LIP should additionally enter an order for an RT Consult. The consult request should specify that a patient requires a supplemental oxygen source for the pass. An RT will then calculate oxygen requirements, provide a filled O<sub>2</sub> cylinder, and the required instruction.
- As soon as you have knowledge that a patient may be discharged home with supplemental oxygen, contact a social worker to coordinate and obtain supplemental oxygen for home care through the patient's home care provider.

If you have any questions or suggestions, please contact Dennis Brown or Melanie Elder (301- 496-0758).

## CC Nurses Out and About

### Welcome to the newest members of the NPCS Staff!

- Samuel Bell (2E)
- Paulette Bell (8E)
- Phillip Bernaldez (8E)
- Edalia Cedeno-DeJesus (2W)
- Tim Coleman (CSO)
- Keelin Cromar (13W)
- Amanda Funhouse-James (5W)
- Twilla Griffin (3W)
- Jennifer Hunt (8W)
- Sharon Leigh Kiger (2E)
- Ellyse Lamont (CSO)
- Yolanda Lewis
- Beatrice Minor (3E)
- Anita Oko-Odoi (12E)
- Marlene Peters-Lawrence (2W)
- Christopher Quintyne (ROOR)
- Sandra Robinson (2W)
- Anthony Terry (OPI2)

### Welcome to the newest members of the CSO Administrative Coordinator Team

**Val Fiorillo RN (104-8558)** has been at the CC (12 East) since 1994 graduating from the Cancer Nurse Internship in 1995. As a unit coordinator, protocol manager, and primary nurse on 12 East, Val brings a dimension of leadership skills to the AC role that will be invaluable.

**Ellyse Lamont RN (104-5533)** comes to the CC with experience as a clinical manager on a medical-surgical unit, a research study coordinator, and a bilingual nurse case manager. Ellyse most recently worked as an off-shift nursing supervisor in a local community facility.

**Linda Wingo RN MS (104-5548)** transferred from the VA system where she worked as a nurse manager at a comprehensive nursing and rehab center. Linda's prior experience includes Regional Director of Nursing for a correctional facility, unit coordinator of a behavioral health unit, and a primary nurse in a rehab facility.

**Sarala Vijayakumar RN (104-5551)** has several years' experience as an off-shift administrative/nursing supervisor in a local community facility. Sarala's prior experience includes clinical staff nursing in medical-surgical and critical care settings.

## Awards and Publications

**Margaret Bevans** was awarded the Josh Gottheil Memorial BMT Career Development Award by the Oncology Nursing Society, May 2004.

**Bevans, M., Marden, S., Leidy, N., Soeken, K., Rivera, P., Cusack, G., Mayberry, H., Bishop, M., Barrett, J.** (2004). Health-Related Quality of Life and Symptom Distress in Patients Undergoing Non-Myeloablative (NST) versus Myeloablative (MT) Allogeneic Peripheral Blood Stem Cell Transplantation (PBSCT). Biology of Blood and Marrow Transplantation, 10, 271.

**Jones-Wells, A., Cusack, G. and Chisholm, L.** Patient Intensity in an Ambulatory Oncology Research Center: A Step Forward for the Field of Ambulatory Care, Part II. Nursing Economics, 22 (3), 120-123.

## Web Updates

### "A Conversation with Vernice Ferguson"

Our 2004 National Nurses' Week Celebration was launched on May 6<sup>th</sup> with a special presentation by Ms. Vernice Ferguson, RN, MA, FAAN, FRCN. Ms. Ferguson is a nurse leader who has had a profound impact on healthcare. If you would like to hear her presentation, you can access it from the NPCS intranet ([http://intranet.cc.nih.gov/nursing/celebration\\_of\\_nursing/2004\\_toc.html](http://intranet.cc.nih.gov/nursing/celebration_of_nursing/2004_toc.html)). Many thanks to the Recruitment and Retention Committee for making this presentation available to us.

### NIH Intramural Blood and Marrow Transplant Consortium

The official web site of the NIH Intramural Blood and Marrow Transplant Consortium (<http://intranet.cc.nih.gov/bmt/>) was launched on June 24<sup>th</sup>. This site provides staff with resources commonly used in BMT research and clinical care at the CC. In addition to other valuable resources, you can find the Consortium's "Guidelines for Infection Management" and "Guidelines for Menses Suppression" as well as the Pharmacy's "Guidelines for Antiemetic Therapy."